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Body

WARNING: This story contains sensitive subject matter, including suicide and self-harm, that could be triggering for some readers.

He was 23. He spent the January afternoon filling out applications for graduate school. He had recently returned to his family's home north of Toronto after a year teaching English in China. He had a driving test scheduled for the next day.

That evening, he chatted with his parents about the future and next steps in his young life.

They remember their son, Kyle Gardiner, sounding hopeful.

Around midnight, Gardiner got out of bed, walked past his parents' bedroom where his mother slept, headed downstairs and turned right, passing the doorway to the basement where his father was watching television, and made a choice he had been quietly pondering for years.

Gardiner was memorialized in an Aurora funeral home on Feb. 15 of this year by 200 friends and family who had little understanding of the seriousness of his pain.

"When people looked at Kyle they saw the black belt in karate, a guy who jumped on a plane to go to university in the Netherlands.

Everybody looked to him as someone who is really successful," said his father Terry. "But inside, he was crumbling."

Something is happening inside the minds of our young people.

One in five Canadian youth are part of a mental health crisis that is undermining - and far too often ending - their lives as they struggle to find effective help that may never arrive.

Of 152 Canadian and U.S. post-secondary students who said they face mental health challenges and who were interviewed by this investigation over the past year, just over 60 per cent said they have considered quitting school as a result of their mental health. Forty-eight per cent have contemplated suicide.

The students cited workload and isolation as key mental health stressors. And, like Gardiner did before his death, many also pointed to existential angst over current events and climate change as a catalyst.

The youth mental health crisis is straining campuses, which are struggling to meet the need for services.

When university student Kayla Picard was in crisis last year, she said she was told the first available appointment was in six to eight weeks. She attempted suicide during that wait.

More than 55 per cent of students interviewed said they had to wait weeks or months for a first assessment on campus. And 92 per cent had to wait that long for a second appointment.

Among the common barriers to seeking help cited by the students were stigma, language barriers or fear of repercussions such as being forced from their academic program or residence.

Co-ordinated by the Toronto Star and the Investigative Journalism Bureau based at the University of Toronto's Dalla Lana School of Public Health, this investigation obtained mental health data from 40 universities and colleges; reviewed more than 100 academic studies; and interviewed more than 200 young people, academics, clinicians, post-secondary administrators and teachers.

Measuring mental health on university and college campuses is difficult in Canada. There is no national database or centralized reporting. This investigation filed dozens of freedom of information requests to post-secondary institutions seeking data on mental health appointments, wait times, budgets, accommodations and suicides over the past six years.

There were dramatic differences in how some schools responded to the requests. OCAD University in Toronto said the information would take more than 20,000 hours to retrieve and cost \$672,090, while Brock University waived its search fees, describing the time required to find the records as "minimal."

Of the more than 100 colleges and universities this investigation approached, 40 provided meaningful data. Though the statistics provided vary from school to school in terms of scope and time frame, the results reveal a postsecondary system overwhelmed by unmet need.

Mental health counselling appointments on campus increased an average of 36 per cent in the past six years. And mental health accommodations - custom academic supports such as extra time for assignments and tests - have increased by an average of 99 per cent in that time, transforming classroom protocols, academic standards and student expectations.

These steep increases happened at schools where enrolment increased less than 11 per cent on average since 2013.

Mounting student mental health strains have also pushed academic administrators to spend millions on counselling and other support services.

The surging demand for youth mental health services has swamped some campus security departments.

Campus mental health apprehensions - incidents in which students are detained under provincial mental health legislation on the basis that they pose a risk to themselves or others - have been rising at some schools, in some cases dramatically.

At the University of Waterloo, there were 62 apprehensions under Ontario's Mental Health Act in 2018/2019 - a 417 per cent leap from 12 in 2014/2015. Waterloo officials said the spike "corresponds to a period of time where mental health concerns were a high priority on campus."

Suicide is the second leading cause of death in Canada for those between the ages of 15 and 24. When it comes to youth suicides, Canada ranks fifth out of more than 30 countries in the Organisation for Economic Co-operation and Development (OECD).

There are regional disparities that researchers haven't explained. In Manitoba, suicide is the most common cause of death for youths aged 10 to 17.

In Canada, increased unemployment from the global pandemic will trigger an estimated additional 418 to 2,114 suicides in 2020-21 compared to pre-COVID rates, according to a study published in August in the journal Psychiatry Research.

"There are going to be a lot of mental health problems, even after the pandemic is over," said Dr. Benoit Mulsant, chair of psychiatry at the University of Toronto. "There will be economic devastation, depression. Millions of people will have suicidal thoughts."

Most universities and colleges did not provide campus suicide data, citing privacy concerns and incomplete reporting. Those that did recorded a total of 40 suicides since 2014, though schools typically do not include off-campus student deaths.

At the University of Toronto, there have been seven student suicides in the past six years, according to information released from the school. After a series of three deaths in the computer science building since 2018, the university blocked an indoor balcony in the popular late-night study destination.

At the University of Ottawa, there have been six student deaths in the span of 11 months, though the school has not identified the causes of those deaths.

"It is a crisis, it is a challenge, an enormous challenge," University of Ottawa president Jacques Frémont said at a news conference in February, following the school's fifth death. "If there was a simple solution, I swear to God, we would implement it tomorrow morning."

Schools have struck task forces, invested millions in mental health programs, created early alert systems to identify students in need, hired third-party mental health contractors and experimented with integrated service models bringing together a range of experts to help tackle spiking demand and student desperation.

Philip Landon, vice-president of Universities Canada, a lobby group representing universities at the federal level, said university presidents are "very, very taken" with the problem.

"It is a broad societal problem that requires broad societal solutions. How do they connect their care for students with the public health-care system? How do they ensure that students are not falling through the cracks?"

One of the solutions is increased mental health funding.

Public and private investments poured \$16 billion into mental health services in 2015 to meet the needs of all Canadians, according to a 2017 report from the Mental Health Commission of Canada (MHCC).

But government spending on mental health remained at 7.2 per cent of Canada's total health spending, "well below Canada's G8 peers," the study reports. By comparison, England's National Health Service spends 13 per cent and France spends 15 per cent, a 2019 analysis by the Canadian Institute for Health Information found.

When young people seeking mental health help turn to the public health-care system, they frequently face wait times that reach into months - or longer.

In Ontario, 28,000 children and youth are waiting as long as 2.5 years to access mental health care, according to a 2020 report from Children's Mental Health Ontario. Average waits for counselling and therapy are 67 days and the wait for intensive treatment is 92 days, the report says.

That has made post-secondary institutions de facto primary caregivers for millions of young people on campus. But far too often, they are hitting the same walls.

"We need to do better," said the U of T's Mulsant. "I've been at this for 36 years and there's been no progress ... Our generation has failed."

He calls Canada's mental health care system "stuck and misdirected."

"We have a problem with access to care and a problem with quality of care," he said. "If we do more of the same, more of the Canadian way and everybody is polite, in the end we don't change anything. I'm part of the system, and I'm frustrated."

Mulsant said it is possible to cut suicide numbers in half using the same co-ordinated approach that dramatically reduced deaths due to heart attacks over the past three decades. It would include detecting and addressing mental health risk factors early and improving access and quality of mental health treatment.

"This would require a major investment in our health system - several hundreds of millions of dollars each year - but this is only \$20 to \$30 per Ontarian."

When they arrive at college or university with new-found independence and increasing academic pressure, many young people describe mental health challenges they're unequipped to handle.

Kyle Gardiner's mental health descent at university, never fully comprehended by his friends and family, is detailed in journal messages and internet browsing data that remain on his computer. Social media posts hinted at mental strain.

Struggles appear to be mounting at least as early as 2016, when he tweeted, "Why do I have to go through at least one depressive episode every two weeks or so?"

In an April 2017 tweet, he wrote: "I just wanna see my friends so I can momentarily forget that we all die alone and life is meaningless."

Julia Cselotei, who shared an apartment with Gardiner for a year and a half at university, said that in retrospect there were signs she didn't see at the time.

"Looking back on it, it was often difficult to get an emotional response from him, or to feel like he wanted to hang out with us. I now realize that that was likely due to his depression or other mental health issues."

Six of Gardiner's friends shared reflections on his life and death.

"I think our whole generation is disproportionately affected by mental health issues, likely due to our upbringing amongst the intensity of the culture the internet fuels," said Maddy Sanzo, one of Gardiner's friends. "Kyle was someone who was clearly deeply affected by the constant stream of negativity being broadcasted through all our social media platforms, and it has certainly caused us all to feel a sense of impending doom."

By August 2019, Gardiner was pondering suicide: "Kill self (always possible)," reads a written entry in his personal journal.

Then, on New Year's Day 2019, he posted a revealing admission on Instagram: "In my last semester of college I spiralled into a deep depression, mismanaged my responsibilities and isolated myself from all my friends ... I tried to kill myself twice, nine and seven months ago respectively."

Some friends responded with supportive messages, many sharing their own struggles.

Ella Shields, another of Gardiner's friends, recalls learning about the post after his death.

"It's really, really sad to me that he said this and he didn't get the help that he needed," she said.

Gardiner's parents saw an entirely different young man, with solid grades, the confidence to move to the Netherlands for school, a social conscience and desire to make an impact on the world.

They are far from alone. Statistics Canada data collected last year reveals parents misjudge the mental health of their children about half the time. And when that happens, they often believe their children's mental health is better than their children report.

The sombre task of going through Gardiner's laptop in search of missed clues has fallen to his father Terry.

"He was very lonely. I can look at his YouTube history and he was reviewing videos about how to meet people and start conversations with girls. And he was reading books about relationships. Because he was very guarded at his core, the further he slipped into depression, the more he was looking for this lifeline of a relationship."

His Facebook account shows saved articles ranging from recipes for caramel apple dip to an account of Anthony Bourdain's death, and a story titled "More than 9 million Americans consider suicide every year: I'm one of them."

"You could see that he was having depression and suicidal thoughts as far back as second year," said his mother Sue.

And he was also becoming increasingly ideological.

Gardiner's internet browsing history at the time shows articles about social inequality and climate change alongside personal notes expressing outrage.

In December 2019, he tweeted: "Isn't it insane that we're facing the inevitable collapse of society in a few decades and we're still like, 'yay we banned plastic straws?!?!?!"

"It's too late. We can't even tax carbon ... give up and embrace our doom."

About a week before Gardiner's suicide, his father noticed a coil of rope sitting on one side of the couch.

"I asked him what he had that for. He said, 'I just took it out of the storage room and forgot to put it back.' "

Terry said his son hung it back up and went on his way. Later, he said to his wife: " 'You know, it was kind of strange. It wasn't a hammer or a screwdriver. It was rope. You think he's really depressed?' "

They agreed there couldn't be anything to it.

"I remember that conversation," said Sue. "But he was present and engaged at dinner, we have conversations every day, he dresses like a million dollars with a vest and a tie," she recalled. "He's listening. He's taking in the advice we're giving him. There's no anger, no alcohol abuse, no drugs. He's going through a rough patch but he seems to be on top of it."

His grades were solid. And his parents both say their son never mentioned seeking counselling. They say they see now what they couldn't at the time.

"His mind was a mess. The weight of depression was altering the way he viewed things," said Terry. "We were misunderstanding things ...We were thinking we were helping him along but we weren't addressing the core issue with him which was self-image ... self worth."

There are no national standards for counselling wait times in Canada.

Some universities and colleges declined to provide numbers in response to the investigation's requests for wait times and mental health data, including Lakehead University based in Thunder Bay, Ont., Fanshawe College in London, Ont. and Trinity Western University based in Langley, B.C.

Among those that did, the average wait for non-emergency counselling was between approximately six and 13 days to see a counsellor. Often, these meetings are for initial assessments, not therapy.

Among the 152 students interviewed for this investigation, many told a very different story, describing wait times ranging from several weeks to as long as six months.

Struggling with suicidal thoughts in October 2019, then first-year Queen's University student Kayla Picard sought urgent help from the campus counselling office.

Despite describing herself as being in a mental health crisis that included suicidal ideation, bulimia and anxiety that prevented her from getting out of bed and attending classes, it would take six to eight weeks for a first counselling session, she said she was told.

Six weeks later, on Nov. 26, still awaiting a counselling appointment, she attempted suicide in her dorm room. Part of the reason she tried to take her own life was because "the university wasn't supporting me enough, in order to get help," she said.

"I literally shouldn't have had to try and commit suicide in order to get services from the university quicker," Picard said. "If you are a university, you shouldn't almost make kids who are suicidal wait eight-plus weeks sometimes to get services and then only really support them when they are literally in critical condition."

While in hospital, a Queen's outreach counsellor told Picard she would receive counselling every five to six weeks beginning in January, she said. When Picard said she needed more help than that, she said she was told it is all the school could offer.

She said the experience left her feeling even more alone than she had prior to attempting to take her life. "There was very little support offered," Picard said.

Queen's officials said they could not comment on individual student cases due to privacy restrictions, but said "we are extremely concerned about our students' wellness and take these comments very seriously." The university said it has significantly bolstered services to meet rising demand, including hiring more than 10 additional counsellors and having same-day appointments available for "urgent situations."

"We have all been doing our best to respond. Universities like Queen's, where most students are not local, face additional volume, as students are distant from their families and their pre-existing support networks, including health care professionals," said the university's Ann Tierney, vice-provost and dean of student affairs, in a written statement.

Some students say their schools are doing their best to respond to the crisis. It just isn't enough.

UBC Okanagan student Kimberly Rutledge has experienced the university mental health care system from both sides - as a client and in her current role as a researcher with the university's health and wellness centre.

"I understand that (the university) is putting great effort into it," said Rutledge, "But ... if it was enough, one in five of us wouldn't be struggling."

A key culprit behind the soaring demand for counselling is the competitive environment students experience at university, she said.

"The expectations are just so high," said Rutledge, 24, who is pursuing a double major in biology and psychology and said she sleeps as little as four hours a night to keep up with her schedule.

"You have to be going to school, but you also have to be volunteering this many hours and if you want to get a master's degree ... you have to be doing this much research experience and you have to have publications."

Rutledge remembers taking four finals in less than three days during her fall semester of 2019, the exact timing of her exams falling just outside the requirement to have the dates moved. "It was awful," she said. "When it actually counts, we're not getting the support that we actually need."

While schools are urging students to take care of their mental health, it amounts to mixed messaging, she said.

"Everyone's like, 'Oh, no, you need to take care of yourself, you know, you need to do self care,' but I don't have time to do all of that," she said.

Santa Ono, president of the University of British Columbia, said, "I appreciate (Rutledge's) perspective and the perspective of other students, and I think that instead of saying it's no one's fault, you know, what's incumbent upon people like myself and institutions is to think about how to accomplish culture change."

One has made campus mental health a top priority, inspired in part by his own challenges as a young man, which included a suicide attempt at age 14.

He said student mental health has emerged as one of the top five priorities at national and international gatherings of university presidents. And UBC has invested millions in new programs and hiring additional counsellors, he said.

"It takes money, but it also takes a clear plan," he said. "I think that if you were to interview me again five years from now, I hope I would be able to say...you can change that."

Kyle Gardiner's room at the family home in Aurora is untouched. In the closet, his neck ties hang neatly on an organizer above carefully rolled belts and winter scarves. Next to them, his shirts and sweaters are crisply ironed, some still covered by dry cleaning bags.

On his bedside bookshelf, autobiographies of Malcolm X and Martin Luther King Jr. sit beside "The Subtle Art of Not Giving A F***."

His private messages leading up to his death speak about his passion to attend law school at McGill University. His internet browsing history showed repeated visits to the university's website to review requirements and application forms.

He had written the LSAT and nailed it, scoring in the 96th percentile. And he had begun the application process three years in a row, only to let the deadline come and go, his parents say.

Each time, he struggled with the personal statement required with the submission.

They couldn't figure out why. He had a rich and varied story, both academic and personal, to tell.

Now they understand.

"He was struggling with self-value and self-worth for a long time," said Terry.

In the final weeks of his teaching contract in Beijing, Gardiner began casually dating an American woman named Cas Bardos. One night over dinner in a secluded restaurant, he confided to her his past suicidal ideation.

"I was truly shocked by this and even sat in silent shock for a while after he said this," she recalled. "I assumed this and the deeper depression was something specific to his college experience and that he no longer felt as affected."

After Gardiner returned home from Beijing last December, the two remained in touch. In early January, Bardos messaged to tell Gardiner that a long-distance relationship isn't something she could manage. He was understanding, asking if they could simply remain friends. They agreed.

Only a few days after their last message in January, Bardos was travelling in South Korea. A co-worker reached out to her on a video chat to tell her the news.

"I still have not fully processed it," she said. "To be honest, I was also really concerned that my relationship with Kyle played a part in his decision. To this day I am not sure if he was hiding deeper pain over this decision."

The day before his death, Gardiner filled out applications for graduate programs in public policy and international affairs and reached out to former professors for letters of reference - steps his father now sees as a form of quiet resignation for his son.

"He was giving up on his dream ... Deep down he wanted to be a lawyer."

The next morning, Kyle didn't arrive for breakfast as he usually did.

Sue went upstairs to his room.

Lying on his fully made bed was a handwritten note on lined paper: "Please let people know my decision beyond family." Neatly penned beneath was a list of passwords for his social media accounts.

The boy they saw filled with promise, engaged and focused on his future, had been preparing something very different.

What remains for the two parents is guilt.

Sue ponders the sequence of "tiny moments" when perhaps there could have been something she could have seen or done.

"I should have looked at it differently, pushed harder to ask about feelings. But you have this fear in the moment, if I push too hard, he's going to clamp up and not talk about anything. So you never get to the issue."

Standing before family and friends on the day of Kyle's memorial, Terry asked publicly the question likely on many minds that day: Were there signs?

"I'll say this," he told them. "Kyle loved to canoe, so imagine when all of the water is gone from a river, it is easy to look back and see all of the dangers that were there, the boulders, submerged logs, weeds ... But when the river is full of water, a fast flowing beautiful life ... you are so awed by the strength of the flow, and so profoundly in love with the beauty of God's creation, that you may not recognize the danger of what lies beneath the surface."

And then, he told all assembled to pause.

"Be scared. Realize that it could be you that is standing here."

This series examining youth mental health is part of a cross-border investigation involving the Toronto Star, the Investigative Journalism Bureau (University of Toronto's Dalla Lana School of Public Health), NBC News, the National Observer and journalism faculty and students from the following universities: Stanford University, Temple University, University of Missouri, Syracuse University, City University of New York, University of British Columbia, Ryerson University, Carleton University and the University of King's College. See the full list of contributors at thestar.com.

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